

MAILED

APR 29 2003

U.S. PATENT AND TRADEMARK OFFICE
BOARD OF PATENT APPEALS
AND INTERFERENCES

4390



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

ASSISTANT SECRETARY AND COMMISSIONER OF
PATENTS AND TRADEMARKS
Washington, D.C. 20231

Paper No: 22

Baxter Healthcare Corporation
Renal Division
1 Baxter Parkway
DF3-3E
Deerfield, IL 60015

Appeal No:
Appellant:
Application No:
Hearing Room:
Hearing Docket:
Hearing Date:
Hearing Time:
Location:

2003-0235
Connell, Mark E., et.al
09/711,240
B
A
Tuesday, July 15, 2003
1:00 PM
Room 12C07 CRYSTAL GATEWAY 2 1225 Jefferson Davis Highway Arlington, VA 22202

NOTICE OF HEARING

CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 1.194(a).

The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up.

The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED.

This form must be completed below and filed with the Board of Patent Appeals and Interferences preferably by facsimile within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this form may alternatively be filed by mail if facsimile is not available.

Failure to file this form within this time period will be construed as a waiver of the request for oral hearing.

37 CFR § 1.136(a) does not apply.

By order of the Board of Patent Appeals and Interferences

BPAI HEARINGS FAX No:

BPAI Mailing Address:

(703) 308-6199

See

1108 Off. Gaz. Pat. Trademark Office
15 (Nov. 14, 1989)

BOARD OF PATENT APPEALS AND INTERFERENCES
COMMISSIONER OF PATENTS AND TRADEMARKS
WASHINGTON, D.C. 20231

Clerk of the Board (703)-308-9797

In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE:

HEARING ATTENDANCE CONFIRMED
 HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant

Date

Registration No.